## FEDERAL COMMUNICATIONS COMMISSION Washington, DC 20554

Approved by OMB 3060-0076 Est. time per response: 1 hour

## COMMON CARRIER ANNUAL EMPLOYMENT REPORT

[Please read instructions before completing and for Notice regarding public burden.]

SECTION 1 - General Informa	tion																
		enondent															
1. Name and Mailing Address of Respondent F&B Communications, Inc													l	<u> </u>			
103 N. Main Street												Check here if this					
Wheatland, Iowa 52777														is a change of address.			
w neatiand, iowa	32	.///												l au	11622.		
2. Year Report Filed			3. Reporting	Period (Fnd	ing Date of Pa	av		Number of Full-Time Employees during Selected									
2017			Period Co	overed by Re	port)	-,		Reporting	Period (chec								
			1/31/2	2017				a. Fe	wer than 16 (com								
SECTION II - Full-Time Emplo								D. E. 10	or more (com	piete ali seci	ions)						
SECTION II - Pall-Time Emplo	your	·		_				Nico	nber of Emplo	wee							
Job Categories	- 1	(Report employees in only one category)															
	ſ		Race/Ethnicity														
	Ī		anic or		Not-Hispanic or Latino											Total	
		La	tino			Ma	ale			Female						Columns A - N	
		Male	Female	White	Black or African	Native Hawaiian or	Asian	American Indian or	Two or more races	White	Black or African	Native Hawaiian or	Asian	American Indian or	Two or more races		
	- 1				American	Other Pacific		Alaska Native		ľ	American	Other Pacific		Alaska Native			
						Islander		, water				Islander		IVALIVO			
		A	В	С	D	E	F	G	н	1	J	к	L	М	N	0	
Executive/Senior Level Officials and Managers	1.1			1												0	
First/Mid-Level Officials and Managers	1.2			1						1						0	
Professionals	2				-											0	
Technicians	3			7						2						0	
Sales Workers	4															0	
Administrative Support Workers	5									4						0	
Craft Workers	6									-						0	
Operatives	7	_									<u> </u>		-			0	
Laborers and Helpers	_	<u>_</u>	-														
Laborers and Reipers	8		ļ			<u> </u>										0	
Service Workers	9															0	
TOTAL	10	0	0	9	0	0	0	0	0	7	0	0	0	0	0	16	
PREVIOUS YEAR TOTAL	11			7						7						14	

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SECTION III - Part-Time Emplo	yees.															
		Number of Employees (Report employees in only one category)														
Job		Race/Ethnicity														
Categories		Hispanic or Latino		Not-Hispanic or Latino												
				Male							Female					
	Male	Female	White	Black or African American	Native Hawaiian or Other Pacific Islander	Asian	American Indian or Alaska Native	Two or more races	White	Black or African American	Native Hawaiian or Other Pacific Islander	Asian	American Indian or Alaska Native	Two or more races		
	Α	В	С	D	E	F	G	Н	1	J	К	L	М	N	0	
Executive/Senior Level Officials and Managers	1.1														0	
First/Mid-Level Officials and Managers	1.2														0	
Professionals	2								27						0	
Technicians	3		1						1						0	
Sales Workers	4														0	
Administrative Support Workers	5														0	
Craft Workers	6														0	
Operatives	7														0	
Laborers and Helpers	8		1												0	
Service Workers	9														0	
TOTAL	10 0	0	2	0	0	0	0	0	1	0	0	0	0	0	3	
PREVIOUS YEAR TOTAL	11		2						1						3	
SECTION IV - Report of Discrin	nination Com	plaints Pursu	ant to 47 CFF	R 22.321, 23.	55, 90.168, 10	1.4, and 101	.311.	•	-1							
This is to advise the Commission that no complaints regarding violations of the equal employment provisions of Federal, state, territorial, or local statutes have been filed against this company before any body having competent jurisdiction in such matters during the calendar year covered by this report.  This is to advise the Commission that the following complaints alleging violations of the provisions of any equal employment opportunity statute have been filed against this company.  (Attach a list indicating parties involved, date filed, courts or agencies before which the matter has been heard, file number or other designation, and current status or disposition.																
SECTION V - Certification										masukithista saa -1, N Saa						
I certify that to the best of my knowledge, information, and belief, all statements in this report are true and correct.																
Date 5/8/2017	yped or Printed <b>Cenneth</b>	Name of Pers Laursen		Signature							Telephone No. 563-374-1236					
Title of Person Signing General Manager	Title of Person Signing WILLFULLY FALSE STATEMENTS MADE ON THIS FORM ARE PUNISHABLE BY FINE AND/OR IMPRISONMENT (18 U.S.C. 1001) AND/OR REVOCATION												EVOCATION			